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| ٠.               | UTILITY          |
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| g <sub>b</sub> A | TENT APPLICATION |
| 72               | TRANSMITTAL      |

Assistant Commissioner for Patents

for new non-provisional applications under 37 CFR 1.53(b))

| Attorney Docket No.  | Sha 2                     |                |
|----------------------|---------------------------|----------------|
| First Named Inventor | or Application Identifier | Yung-Ching Sha |

Title Automatic Procetion Switch Decision Engine

Express Mail Label no. EJ936726939US

|                    | Box Patent Application Washington D.C. 20231   |   |           |                 |                    | JCS  |
|--------------------|--|---|-----------|-----------------|--------------------|------|
|                    | APPLICATION EL   | EMENTS  | •         | ACCOMPANYING AF | PLICATION PART     | rs · |
|                    | Fee Transmittal Form (original and of Specification Total Intitle cross reference to related application background summary brief description of the drawings (if file detailed description claims abstract  Drawing(s) Total Interpretation (for continuations/divisionals with second Total Interpretation To | ACCOMPANYING APPLICATION PART  Assignment Recordation form Power of Attorney Postcard Small entity statement Certified copy of priority documents Information disclosure statement Copies of IDS citations 37 CFR 3.73(b) Statement check Other |           | S               |                    |      |
|                    | Other  |   |           |                 |                    |      |
| lf a C             | ONTINUING APPLICATION, check a Continuation Divisional   | appropriate box and supply the req  Continuation-in-part (C   |           |                 |                    |      |
| . <del></del><br>1 |  | CORRESPONDENCE ADD  | RESS      |                 |                    |      |
|                    | Customer Number or Bar Code Label  | (insert Customer No. or Attach bar code la  | bel here) | Correspond      | ence Address below |      |
| NAM                | E Henry T. Brendzel  |   |           |                 |                    |      |
| ADDI               | RESS Box 574, Springfield, NJ  | 07081   |           |                 |                    |      |
| COU                | NTRY United States   |   |           |                 | FAX (973) 467-     | 6589 |
|                    |  | NATURE OF APPLICANT ATTORI  | NEY, C    | r               |                    |      |
| Name               |  |   |           | Reg. No. 26844  |                    |      |
|                    | phone (973) 467-2025   |   |           | Data /          | ,                  |      |
| Signa              | Aleny Br   | endel   |           | Date /2/4/      | 9)                 |      |

I hereby certify that this Application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C. 20231.

Date of Deposit

**Henry Brendzel** 

(Printed Name of Person Mailing Paper)

(Signature of Person Mailing Paper)

SUBMITTED BY

Signature

Typed of Printed Name

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| - 1 | _ |  |

(\$) 890

TOTAL AMOUNT OF PAYMENT

| PTO/SB/17 | Modified | 12/98 - | Henry | Brendze |
|-----------|----------|---------|-------|---------|
|           |          |         |       |         |

Sha 2

Reg. Number

Date

Deposit Account User ID

|   | Com                  | olete if Known |
|---|----------------------|----------------|
| _   | Application Number   |                |
| FEE TRANSMITTAL Patent Fees are subject to annual revisions on October 1.   | Filing Date          |                |
| These are subject to annual revisions on October 1.  These are the fees effective November 10, 1998  Small entity payments must be supported by a small entity statement, | First Named Inventor | Yung-Ching Sha |
| Otherwise, large entity fees must be paid. See Forms PTO/SB/09-12.  | Examiner Name        |                |
|   | Group/Art Unit       |                |

Attorney Docket ID

| METHOD OF PAYMENT (check one)                                     |                      |            |                         |  | FEE CALCULATION (continued) |  |  |           |
|---|----------------------|------------|-------------------------|--|-----------------------------|--|--|-----------|
| 1. The Commissioner is hereby authorized to charge indicated fees |                      |            | 3. ADDITIONAL FEES      |  |                             |  |  |           |
| and other underpayments, and credit overpayments to:              |                      |            |                         | Fee Description  | Fee Paid                    |  |  |           |
| Deposit Acc   | ount Number          | De         | eposit Acc              | ount Name  |                             |  | Surcharge – late filing fee or oath                    |           |
| 12-2325   |                      |            | Lucent T                | echnolog   | gies, Inc.                  |  | Surcharge – late provisional filing fee or cover sheet |           |
| Charge ar   |                      |            |                         |  | Set in 37 CFR               |  | Non-English specification                              |           |
| Required<br>1.16 and  | under 37 CFR<br>1.17 |            | 1.18 at th<br>Allowance |  | the Notice of               |  | For filing request for reexamination                   |           |
| 2. Paym   | ent enclosed         | <b>d</b> : |                         |  | ,                           |  | Requesting publication of SIR prior to Examiner action |           |
| ☐ Che   | ck [                 | Money      | Order                   | ☐ Ot   | her                         |  | Requesting publication of SIR after Examiner action    | A         |
| -   | FE                   | E CALC     | ULATIO                  | 1  | <u>-</u>                    |  | Extension for reply within the first month             |           |
| 1. FILING F   | EE                   |            |                         |  |                             |  | Extension for reply within the second month            |           |
| 1   | Fee Descrip          | tion       |                         |  | Fee Paid                    |  | Extension for reply within the third month             |           |
| Util  | ity Filing Fee       |            |                         |  | 760                         |  | Extension for reply within the fourth month            |           |
| Des   | sign Filing Fe       | е          |                         |  |                             |  | Extension for reply within the fifth month             |           |
| Pla   | nt Filing Fee        |            |                         |  | ) <del></del>               |  | Notice of Appeal                                       |           |
| Rei   | ssue Filing F        | ee         |                         |  |                             |  | Filing a brief in support of an appeal                 |           |
| Pro   | visional Filin       | g Fee      |                         |  |                             |  | Requesting an oral hearing                             |           |
|   |                      | SUBTO      | TAL (1) (               | <b>5</b> )   | 760                         |  | Petition to institute a public use proceeding          |           |
| 2. CLAIMS   |                      |            |                         |  | 1                           |  | Petition to revive - unavoidable                       |           |
|   | Claims               | Highest    | Extra                   | Rate   | Amount                      |  | Petition to revive - unintentional                     |           |
|   | remaining            | Paid       |                         |  |                             |  | Utility issue fee (or reissue)                         |           |
| Total<br>Claims   | 25                   | 20         | 5                       | 18   | 90                          |  | Design issue fee                                       |           |
| Ciairis   |                      | -          |                         | "  | 00                          |  | Plant issue fee  |           |
| Independent<br>Claims   | 2                    | 3          | 0                       | 78   | 0                           |  | Petitions to the Commissioner                          |           |
| Olaims  | _                    | 1          |                         | '  | · ·                         |  | Petitions related to provisional applications          |           |
| Multiply<br>Dependent   |                      |            |                         | 260  | 0                           |  | Submission of Information Disclosure Statement         |           |
| Claims  |                      |            |                         | •  |                             | Recording each patent assignment per property (times number of properties) | 40   |           |
| SUBTOTAL (2) (\$) 90  |                      |            |                         | Filing a submission after final rejection (37 CFR1.129(a)) |                             |  |  |           |
|   |                      |            |                         | · .  |                             | For each additional invention to be examined (37 CFR 1.129(b))             |  |           |
|   |                      |            |                         |  |                             | Other<br>fee   | · · · · · · · · · · · · · · · · · · ·                  |           |
|   |                      |            |                         |  |                             | Other  |  |           |
|   |                      |            |                         |  |                             | fee  | SUBTOTAL (2) (\$)                                      | 40        |
| 0110  |                      |            |                         |  |                             |  |  | -Carleta' |
| SUBMITTE  | :DRA                 |            |                         |  |                             |  | Complete (if app                                       | Jiicable) |